



TUBERCULOSIS INFORMATION

- Screening for Tuberculosis

Screening for Health Care Workers

All health care facilities should establish a tuberculosis (TB) screening program for health care workers. Health care workers are paid or unpaid persons working in a health care facility who may be exposed to *Mycobacterium tuberculosis*.

Screening is done in health care facilities for two reasons. The first reason is to determine whether health care workers are infected with *M. tuberculosis*. Health care workers who are infected may be candidates for preventive therapy to prevent them from developing TB disease. The second reason is to determine whether TB is being transmitted in the facility. The transmission of TB in the facility indicates deficiencies in the facility's infection control program.

Health care workers should be skin tested upon employment and at least once a year thereafter. Health care workers for whom a positive skin test result has been documented do not have to be retested. Two-step testing should be used for the initial skin testing of all health care workers. The results of screening should be analyzed at least yearly to determine whether TB is being transmitted and to detect problems with the infection control program. Additional testing should be done if exposure to TB is suspected.

Screening for Other High-Risk Populations

Screening for TB is recommended for the following high-risk groups, in addition to health care workers:

- persons who have HIV infection,
- persons who have been in close contact with someone who has infectious TB disease,
- persons who inject drugs,
- foreign-born persons from countries where TB is common,
- medically underserved, low-income populations,
- persons with medical conditions that increase the risk for TB, such as diabetes or malnutrition, and
- residents of long-term care facilities, such as correctional facilities or nursing homes

These high-risk populations are screened for two reasons. One reason is to determine whether persons are infected with *M. tuberculosis*. Persons who are infected with *M. tuberculosis* may be given preventive therapy to prevent them from developing TB disease. Another reason is to determine whether persons have TB disease. Persons who have TB disease are given treatment for the disease. Whether screening focuses on finding infection or finding disease depends on the setting.

Screening can also provide important epidemiologic data. Screening programs should be evaluated periodically to assess their effectiveness.

Screening for TB Infection

Screening for TB infection is done with tuberculin skin testing. Screening should be targeted at either of two groups. The first group is persons who are more likely to have TB infection, for example:

- foreign-born persons from countries where TB is common,
- medically underserved, low-income populations,

- health care workers, and
- residents of long-term care facilities, such as correctional facilities or nursing homes

The second group is persons who are more likely to develop TB disease once infected, for example:

- persons with HIV infection,
- persons who have been in close contact with someone who has infectious TB disease,
- persons who inject drugs, and
- persons who have medical conditions that increase the risk of TB, such as diabetes and malnutrition.

In some high-risk populations, screening for infection may not effectively prevent cases of TB. For example, homeless persons are at high risk for TB infection, but giving them 6 to 12 months of preventive therapy may be logistically difficult. Screening is most valuable for high-risk persons who are likely to complete preventive therapy, and it must be accompanied by follow-up.

The screening of low-risk groups, such as school-aged children who have no risk factors, is not recommended.

Screening for TB Disease

In some circumstances, screening for TB disease with chest radiographs or sputum smears may be more appropriate than screening for infection with the tuberculin skin test. For example, chest radiography may be the best method in jails or homeless shelters, where the time required to give skin tests to large numbers of transient persons and to read results makes screening for infection impractical. Screening for disease may also be more appropriate in situations in which a person with infectious TB disease would pose a risk to large numbers of susceptible persons, such as in residential facilities for HIV-infected persons.

For More Information

To order the following documents, call (404) 639-1819.

CDC. Screening for tuberculosis and tuberculous infection in high-risk populations. *MMWR*. 1990;39(RR-8):1-5.

CDC. Prevention and control of tuberculosis in facilities providing long-term care to the elderly. *MMWR*. 1990;39(RR-10).

CDC. Tuberculosis among foreign-born persons entering the United States. *MMWR*. 1990;39(RR-18).

CDC. *Control of Tuberculosis in Correctional Facilities: A Guide for Health Care Workers*. Atlanta: CDC; 1992.

CDC. Prevention and control of tuberculosis in U.S. communities with at-risk minority populations and Prevention and control of tuberculosis among homeless persons. *MMWR*. 1992;41(RR-5).

CDC. Prevention and control of tuberculosis in migrant farm workers. *MMWR*. 1992;41(RR-10).

For information about implementing CDC guidelines, call your state health department.



PUBLIC COMMENT - TUBERCULOSIS FAX SYSTEM

For a limited time CDC is accepting public comment on the information services you used. We are particularly interested in the areas listed below. If you wish to comment, you may:

FAX this sheet with your comments to: CDC-VIS/FAX (404) 639-1733, or

Mail to: CDC, IRMO MS C-15, 1600 Clifton Road, N.E., Atlanta, GA 30333

1. You are

- ☐ health care professional
- ☐ other

2. Fax sheet(s) you received:

- ☐ Tuberculosis (TB): General Information
- ☐ TB Infection vs. TB Disease
- ☐ Diagnosis of TB Infection (Tuberculin Skin Test) and TB Disease
- ☐ Treatment of TB Infection (Preventive Therapy)
- ☐ Treatment of TB Disease
- ☐ Management of Persons Exposed to Multidrug-Resistant TB
- ☐ BCG Vaccine
- ☐ Infection Control
- ☐ Screening for TB
- ☐ TB Morbidity in the United States
- ☐ Tuberculosis Educational Materials Order Form

3. Reason you requested fax sheet:

- ☐ for general information on topic
- ☐ to answer specific question

If you had a specific question, please describe it:

4. The information met your needs.

- ☐ yes
- ☐ no
- ☐ partially

If you answered no or partially, please describe your unmet needs:

5. Suggestions for additional information sheets or for improving the system: